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Bib Data Sheet

CONFIRMATION NO. 7395

|                             |                                       |              |                        |                                |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|
| SERIAL NUMBER<br>10/614,383 | FILING DATE<br>07/07/2003<br><br>RULE | CLASS<br>362 | GROUP ART UNIT<br>2875 | ATTORNEY DOCKET NO.<br>148-109 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|

APPLICANTS  
 Frederick J. Sandor SR., Satellite Beach, FL; *JS*

\*\* CONTINUING DATA \*\*\*\*\*  
 This application is a CIP of 10/086,965 03/04/2002 ABN *JS*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*JS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 09/30/2003

|  |                           |                        |                       |                            |
|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>JS</i> 6/20/05<br>Examiner's Signature Initials | STATE OR<br>COUNTRY<br>FL | SHEETS<br>DRAWING<br>9 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>4 |
|--|---------------------------|------------------------|-----------------------|----------------------------|

ADDRESS  
 21091  
 JOHN H CROZIER  
 1934 HUNTINGTON TURNPIKE  
 TRUMBULL, CT  
 06611

TITLE  
 Illuminated glass deck light panel and method of installation

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>417 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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